

HEARING SCREENING PROGRAM REPORT

PLEASE PRINT THE TOP PORTION OF THE REPORT

TOTAL ALL COLUMNS CONTAINING DATA

NAME OF SCHOOL:	DISTRICT:	County:
SCHOOL ADDRESS:	CITY:	ZIP CODE:
PHONE #		

PRINT ALL AREAS

SCREENING PERFORMED BY:	IDENTIFICATION # or License #	School Year: 2004 - 2005
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(Audiologist use License # if not a T³ Trainer - Others use Identification Number (Call Sensory Office if you haven't received an Identification Card)

EQUIPMENT CALIBRATION DATE:	Check here if ADHS Equipment was used <input type="checkbox"/>
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	INITIAL SCREENING		SECOND SCREENING		REFERRALS		OUTCOMES					
SCHOOL GRADES	Number of Students Screened	Number of Students Referred for second screen	Number of Students That received second screen	Number of Students Referred for further Evaluation	Number of Students Referred for Medical Evaluation	Number of Students Referred for Audio logical Evaluation	Number of Students that received Medical Follow-up	Number of Students that Received Audiology Follow-up	Number of Students Not Screened or Lost to Follow-up	Number identified with Sensori-neural Hearing Loss	Total # of Students with previously known hearing loss	COMMENTS
PRESCHOOL												
KINDERGARTEN												
FIRST												
SECOND												
SIXTH												
NINTH												
SPECIAL EDUCATION												
OTHERS NOT INCLUDED ABOVE												
TOTALS												

Report Completion Guidelines:

- Submit one report form for each school (Includes students enrolled throughout the school year)
- Students not screened after multiple attempts should be counted in the "referred for further evaluation" column
- All Special Education students must be screened annually. (This includes students over 16)
- Students that did not pass a previous year's screening, or school's decision and any others screened but not reported in another column.
- Ungraded student should be categorized by their age equivalent grade

Report Completed by: _____ Title: _____ Date: _____
Please Print

PLEASE COMPLETE AND SUBMIT THIS REPORT FORM TO ADHS BY JUNE 30Th of the CURRENT SCHOOL YEAR

ADHS/OWCH SENSORY PROGRAM
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 Phoenix, Arizona 85007-3242
 (602) 364-1400